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<b>SERIAL NUMBER</b> 10/044,657	<b>FILING OR 371(c) DATE</b> 01/08/2002 <b>RULE</b>	<b>CLASS</b> 029	<b>GROUP ART UNIT</b> 3729	<b>ATTORNEY DOCKET NO.</b> 12,335
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## APPLICANTS

Jack L. Hoffa, Brea, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/494,461 01/31/2000 PAT 6,336,267  
which is a DIV of 09/320,096 05/26/1999 PAT 6,272,740  
which is a CON of 08/845,065 04/21/1997 PAT 5,937,511  
which is a CON of 08/353,352 12/02/1994 PAT 5,664,324  
which is a CIP of 08/022,981 02/25/1993 PAT 5,375,485  
which is a CIP of 07/857,972 03/26/1992 PAT 5,293,683  
which is a DIV of 07/765,986 09/26/1991 PAT 5,253,555  
which is a CIP of 07/659,557 02/22/1991 ABN  
which is a CIP of 07/611,057 11/09/1990 PAT 5,146,673  
and is a CIP of 08/148,568 11/08/1993 PAT 5,469,763  
which is a CIP of 08/022,981 02/25/1993 PAT 5,375,485  
which is a CIP of 07/857,972 03/26/1992 PAT 5,293,683  
which is a DIV of 07/765,986 09/26/1991 PAT 5,253,555  
which is a CIP of 07/659,557 02/22/1991 ABN  
which is a CIP of 07/611,057 11/09/1990 PAT 5,146,673

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*  
\*\* 02/08/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 41	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

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## TITLE

WIRE AND CABLE CUTTER USING ENDLESS BELT CONVEYORS

<b>FILING FEE RECEIVED</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )

370

No. \_\_\_\_\_ for following:

☐ 1.18 Fees ( Issue )

☐ Other \_\_\_\_\_

☐ Credit